

BUSINESS CONTACT INFORMATION

Legal Business Name		Date business opened	Please fill this form in its entirety. Incomplete forms will delay the process of approval. Allow 2-3 weeks for completion. First order can ship at once with CC/ ACH.
Business Address		<input type="checkbox"/> Sole proprietorship	
Phone Fax		<input type="checkbox"/> Partnership	
E-mail		<input type="checkbox"/> Corporation	
City, State ZIP Code		<input type="checkbox"/> Other	

BUSINESS LOCATION INFORMATION

Annual Sales		Website address	
Hours of Operation		Currently sell CORE® Rifles?	YES NO
Number of employees		Do have a range?	
Open to the General Public		Annual promotional events?	
Own or Rent?		Gunsmith on duty?	

STATE RESTRICTIONS THAT MAY DELAY SHIPMENT

State Compliance Restrictions		CA Department of Justice Number	
Magazine Restrictions		Barrel Restrictions	
Butt Stock Restrictions		Muzzle Brake Restrictions	



SIGNATURES

Signature		Signature	
Name and Title		Name and Title	
Date		Date	